

ATTORNEY OR PARTY WITHOUT ATTORNEY <i>(Name and Address)</i> : _____ ATTORNEY FOR <i>(Name)</i> : SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME: ESTATE OF (NAME): <div style="text-align: right;">DECEDENT</div>	<div style="text-align: center; font-weight: bold; font-size: small;">FOR COURT USE ONLY</div> CASE NUMBER:
NOTICE OF PROPOSED ACTION Independent Administration of Estates Act Objection—Consent	

NOTICE: If you do not object in writing or obtain a court order preventing the action proposed below, you will be treated as if you consented to the proposed action and you may not object after the proposed action has been taken. If you object, the personal representative may take the proposed action only under court supervision. An objection form is on the reverse. If you wish to object, you may use the form or prepare your own written objection.

1. The personal representative (executor or administrator) of the estate of the deceased is *(names)*:

2. The personal representative has authority to administer the estate without court supervision under the Independent Administration of Estates Act (Probate Code section 10400 et seq.)
 - a. ☐ with **full authority** under the act.
 - b. ☐ with **limited authority** under the act (there is no authority, without court supervision, to (1) sell or exchange real property or (2) grant an option to purchase real property or (3) borrow money with the loan secured by an encumbrance upon real property).

3. **On or after** *(date)*: , the personal representative will take the following action without court supervision *(describe in specific terms here or in Attachment 3)*:
☐ The proposed action is described in an attachment labeled Attachment 3.

4. ☐ **Real property transaction** *(Check this box and complete item 4b if the proposed action involves a sale or exchange or a grant of an option to purchase real property.)*
 - a. The material terms of the transaction are specified in item 3, including any sale price and the amount of or method of calculating any commission or compensation to an agent or broker.
 - b. \$ _____ is the value of the subject property in the probate inventory. ☐ No inventory yet.

NOTICE: A sale of real property without court supervision means that the sale will NOT be presented to the court for confirmation at a hearing at which higher bids for the property may be presented and the property sold to the highest bidder.

(Continued on reverse)

ESTATE OF (NAME): <div style="text-align: right; padding-top: 10px;">DECEDENT</div>	CASE NUMBER:
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5. If you OBJECT to the proposed action

a. **Sign** the objection form below and deliver or mail it to the personal representative at the following address (*specify name and address*):

-OR-

b. **Send** your own written objection to the address in item 5a. (*Be sure to identify the proposed action and state that you object to it.*)

-OR-

c. **Apply** to the court for an order preventing the personal representative from taking the proposed action without court supervision.

d. **NOTE:** Your written objection or the court order must be received by the personal representative before the date in the box in item 3, or before the proposed action is taken, whichever is later. If you object, the personal representative may take the proposed action only under court supervision.

6. **If you APPROVE the proposed action**, you may sign the consent form below and return it to the address in item 5a. If you do not object in writing or obtain a court order, you will be treated as if you consented to the proposed action.

7. **If you need more INFORMATION, call** (*name*):

(*telephone*): ()

Date:

(TYPE OR PRINT NAME)	
(TYPE OR PRINT NAME)	(SIGNATURE OF PERSONAL REPRESENTATIVE OR ATTORNEY)

OBJECTION TO PROPOSED ACTION

☐ **I OBJECT** to the action proposed above in item 3.

NOTICE: Sign and return this form (both sides) to the address in item 5a. The form must be received before the date in the box in item 3, or before the proposed action is taken, whichever is later. (*You may want to use certified mail, with return receipt requested. Make a copy of this form for your records.*)

Date:

(TYPE OR PRINT NAME)	
(TYPE OR PRINT NAME)	(SIGNATURE OF OBJECTOR)

CONSENT TO PROPOSED ACTION

☐ **I CONSENT** to the action proposed above in item 3.

NOTICE: You may indicate your **consent** by signing and returning this form (both sides) to the address in item 5a. If you do not object in writing or obtain a court order, you will be treated as if you consented to the proposed action.

Date:

(TYPE OR PRINT NAME)	
(TYPE OR PRINT NAME)	(SIGNATURE OF CONSENTER)